UNITED STATES PATENT AND TRADEMARK OFFICE

(12) CERTIFICATE EXTENDING PATENT TERM UNDER 35 U.S.C. § 156

(68) PATENT NO. : 4,808,605

(45) ISSUED : February 28, 1989

(75) INVENTORS : Quirico Branca, et al.

(73) PATENT OWNER : Hoffmann-La Roche Inc.

(95) PRODUCT : POSICOR® (mibefradil dihydrochloride)

This is to certify that an application under 35 U.S.C. § 156 has been filed in the United States Patent and Trademark Office, requesting extension of the term of U.S. Patent No. 4,808,605 based upon the regulatory review of the product POSICOR® (mibefradil dihydrochloride) by the Food and Drug Administration. Since it appears that the requirements of the law have been met, this certificate extends the term of the patent for the period of

(94) 1,130 days

from November 10, 2007, the original expiration date of the patent, subject to the payment of maintenance fees as provided by law, with all rights pertaining thereto as provided by 35 U.S.C. § 156(b).



I have caused the seal of the Patent and Trademark Office to be affixed this <u>23rd day</u> of <u>July 2001</u>.

Nicholas P. Godici

Nicholas P. Fodin

Acting Under Secretary of Commerce for Intellectual Property and Acting Director of the United States Patent and Trademark Office

Patent Submission Sample Format

This is a format suggestion for submission of patent information for NDAs submitted under section 505 of the Federal Food Drug and Cosmetic Act. For more detailed information please refer to 21 C.F.R. 314.53.

Time Sensitive Patent Information pursuant to 21 C.F.R. 314.53 for NDA #___ The following is provided in accordance with the Drug Price Competition and Patent Term Restoration Act of 1984: Trade Name: Active Ingredient(s): Strength(s): Dosage Form: Approval Date: A. This information should be provided for each individual patent submitted. U.S. Patent Number: **Expiration Date:** Type of Patent--Indicate all that apply: Drug Substance(Active Ingredient) ____Y ___N Drug Product(Composition/Formulation) ____Y ___N Method of Use ___Y ___N a. If patent claims method(s) of use, please specify approved method(s) of use or method(s) of use for which approval is being sought that are covered by patent:_ Name of Patent Owner: U.S. Agent (if patent owner or applicant does not reside or have place of business in the US): B. The following declaration statement is required by 21CFR 314.53. If any of the submitted patents have Composition/Formulation or Method of Use claims, it should be submitted for each patent that contains composition/formulation or method of use claims. The undersigned declares that the above stated United States Patent Number ____ composition, formulation and/or method of use of ______(name of drug product). This product is: currently approved under section 505 of the Federal Food, Drug, and Cosmetic Act) OR the subject of this application for which approval is being sought.) Signed: Date:

Title (optional):

Telephone Number (optional):

The above information should be submitted to the NDA with the original application or as correspondence to an existing NDA. For patents issued after the NDA is filed or approved, the applicant is required to submit the information within 30 days of the date of issuance of the patent.

To expedite publication in the The Orange Book,* the above information may be provided to the Division of Data Management and Services at the address below. You may also contact the Division of Data Management and Services directly at (301)827-5467 regarding listing of patent information.

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* - Please note that patents for unapproved compositions, formulations, or uses will NOT be published in the The Orange Book.